



UPDATE

Maine Department of Human Services
 Kevin W. Concannon, Commissioner
 Bureau of Medical Services
 Quality Improvement Division
 1 V.A. Center
 Building 205, Third Floor
 11 State House Station
 Augusta, Maine 04333
 1-800-566-3818
 TTY/TDD 800-423-4331

To receive this newsletter by mail contact
 Faye Patterson at 207-287-4827

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STATEWIDE PCP CONFERENCE PLANNED

Free CMEs Offered

The Bureau of Medical Services is planning a six hour Primary Care Provider summit meeting in the fall and would like your input in planning the summit. This meeting would include continuing education credits and information on Maine PrimeCare Quality projects, including smoking cessation, ER Utilization and Bright Futures.

In planning this event, we'd appreciate your feedback on such subjects as the most convenient month and day of the week, and suggestions for topics of discussion.

Please take a minute to complete the reply post card included with this newsletter and fax or mail it back to us as soon as possible. Thank you for your support.

TREATING MEDICAID SMOKERS IN MAINE

Smoking has caused over 57 million dollars of health care costs to Maine Medicaid in 1997. Smoking is very prevalent in the Maine Medicaid population. Over 55% of mothers and pregnant women smoked in 1998, and between 30,000-50,000 Medicaid recipients are smokers. This results in approximately a 40% increase in associated health care costs for smokers compared to nonsmokers.

Over 7,500 Medicaid patients, about 7.5% of the adults, tried to stop smoking in 1999. Maine Medicaid spent \$1.1 million dollars on smoking cessation products in 1999.

A survey of Medicaid patients using these products was conducted last summer. Over 2,000 responses were received and over 21% of these clients are still not smoking 9-12 months later.

One of the primary reasons for this success is by offering counseling services and implementing AHCPR guidelines.

The Bureau of Medical Services Response:

We wish to encourage providers to aggressively identify Medicaid smokers, evaluate their receptiveness to stop smoking and employ appropriate treatments and medications.

BMS will create local procedure codes specific to tobacco cessation counselling which will enhance office visit reimbursements. One of these codes will be an add-on-code which can be used in conjunction with a variety of evaluation/management services. In order to take advantage of these tobacco codes, providers will need to adopt the AHCPR guidelines as the standard of care and document adherence in the relevant office notes.

One of the goals of this *Tobacco Cessation Program* will be to promote optional use of smoking cessation products. We will

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MAINE PRIMECARE INTRODUCED STATEWIDE

The Maine Medicaid Program is pleased to announce that the Statewide rollout of the Maine PrimeCare program, our mandatory managed care program, is proceeding well. As many of you know, Maine Medicaid is in the process of implementing a primary care case management program. The Maine PrimeCare Program offers recipients a choice of primary care providers (PCPs) who offer primary care services and manage the health care needs of their patients. Currently, there are approximately 50,000 members in the program.

Medicaid consumers receiving Temporary Assistance for Needy Families (TANF), TANF-related benefits, and foster care children are required to participate in Maine PrimeCare. Many of you have already seen patients who are part of Maine PrimeCare. If you would like to become a Maine PrimeCare PCP, please call HealthWorks at (800) 977-6740. Our experience to date has shown that Maine PrimeCare PCPs fare better in the Primary Care Physician Incentive Program.

The Maine PrimeCare program is currently operating in the following counties: Androscoggin, Aroostook, Cumberland, Kennebec, Piscataquis, Somerset, Washington, and York. We are currently in the process of enrolling consumers in Penobscot county and will be going next to Hancock county sometime in July.

Based on feedback the Bureau has heard from many of you, a change is in the process of being made to our managed care computer based system. Enrollment in the program will begin the first and fifteenth of each month rather than the current daily enrollment. The change will be in effect by the end of May.

Some important points to remember about the Maine PrimeCare program:

- Even though consumers get a

monthly Medicaid card, they are enrolling in Maine PrimeCare on the first and fifteenth of the month and their Medicaid cards may not always contain the most recent information. The toll-free number for our automated Voice Response system is (800) 452-4694. This system contains up to date Medicaid eligibility and Maine PrimeCare PCP information.

- Consumers will not be charged a co-payment for any managed services.
- If you are not the patient's PCP, do not provide managed services without a referral from the patient's Maine PrimeCare PCP.
- When billing for services you have provided with a referral, be sure to include the PCP's authorization number on your claim form. (Block 17a on the HCFA 1500 and block 11 on the UB 92.) If you do not have a referral form from the patient's PCP and include the PCP's authorization number, you will not be reimbursed for your services.

Recipients must call their PCP first for the following managed services:

- Physician Services
- Hospital (inpatient and outpatient)
- Ambulatory Surgical Services
- Ambulatory Care Clinic Services
- Rural Health Clinic Services
- Federally Qualified Health Center Services
- Developmental and Behavioral Evaluation Services
- Early and Periodic Screening, Diagnosis, and Treatment Services (EPSDT) and EPSDT Optional Treatment Services
- Medical Supplies and Equipment
- Lab and X-Ray Services (except those provided by independent labs)
- Home Health Services
- Care from a Specialist
- Physical Therapy, Speech Therapy, Occupational Therapy, Audiology, and Hearing Services

- Eye Care (annual exam may be self-referred)
- Chiropractic Care
- Certified Family and Pediatric Nurse Practitioner Services
- Podiatric Care

Recipients do not have to receive authorization from their PCP for these services: (These services will remain under regular Medicaid.)

- Ambulance Services
- Annual Eye exam
- Community Support Services
- Consumer-Directed Attendant Services
- Dental Services
- Day Habilitation for Persons with Mental Retardation
- Day Health Services
- Day Treatment Services
- Early Intervention Services
- Family Planning Services, includes yearly family planning exam, birth control, screening and treatment for STDs, and pregnancy tests
- Lab services provided by independent labs
- Mental Health and Substance Abuse
- Nurse Midwife Services
- Nursing Facility Services
- Prescriptions
- Private Duty Nursing and Personal Care Services
- Private Non-Medical Institution Services
- School Based Health Clinic and Rehabilitative Services
- Targeted Case Management Services
- Transportation Services
- All Medicaid Waiver Services

If you have any questions about Medicaid policy or billing, please call your provider relations specialist. If you have questions about the Maine PrimeCare enrollment process, or you would like to become a Maine PrimeCare PCP, please call HealthWorks at 1-800-977-6740.

Thank you for your efforts in working with us to make the Maine PrimeCare Program a success.

ADULT IMMUNIZATION UPDATE

The Quality Management Unit has been performing on-site visits to nursing homes to obtain additional data on Influenza and Pneumonia vaccinations...

Immunization rates per facility were recalculated. A total of 5710 residents' immunization status from 110 facilities has been entered into a database. To date, the overall average of Influenza immunization is 83% with a pneumonia immunization rate of 69%. These rates reflect an increase of 41% in Pneumonia immunizations and a 1.4% increase in Influenza immunization rates over the last year.

At this time, the Quality Management Unit has residents listed in the database with documented immunization status. This information will be compared to Medicaid claims data over the next quarter to determine if immunizations occurred that the facilities were unable to access. In August the Quality Management Unit will link the data to claims and other data systems to supply each facility with a list of current in-house patient and their immunizations status if known. For those patients with unknown immunizations, facilities will be requested to determine immunization status, and administer immunizations if needed. The facility will also be required to report this information back to the State so that annually the state will be able to supply updated immunizations to facilities and providers.

This has been a large undertaking and we would like to thank all nursing facilities for their cooperation. It is our hope to make information readily accessible to each facility during the upcoming flu and pneumonia season. If a facility has questions regarding an immunization status of a patient and believes the Quality Management Unit may have this information on file please contact us at 1-207-287-4827 and we will be happy to assist you.

Through the course of our onsite visits to gather information the QM Unit has noted several areas of potential problems. With this in mind we would like to suggest some helpful hints and reminders to facilities:

- Standing Orders must be brought forward to Medication Administration (MAR) sheets when activated. These orders should be updated annually for relevance. In addition, the attending physician should confirm the activated orders.
- An RN should note all physician orders including standing orders, (especially when activated).
- Influenza and Pneumonia vaccinations are medications and should be documented as given on the MAR when administered, if it is the facility policy to document medications administered in this format. If the facility has an immunization sheet staff may need to document in 2 areas. The facility is responsible for following their policies as written.
- All chart entries should be made with a pen. Many records had pencil entries for immunization status.
- If a patient refused the immunizations, the medical record should document that education as to the benefits of immunizations was performed. This is a requirement of the Maine Medicaid program, (Chapter II, section 67, pages 50-51).
- Facilities who responded to the immunization request early in the season had the highest immunization rates.

We would like to remind facilities that the Bureau of Health Immunization Program supplies Influenza and Pneumonia vaccines. Please call the Maine Immunization Program to order these vaccines. The telephone number is 1-800-867-4775 or 207-287-3746

The Quality Management Unit would like to congratulate the following facilities with immunization rates higher than 90% as of 5/1/00.

TOP NURSING FACILITIES WHO IMMUNIZED AGAINST PNEUMONIA:

Rank	Facility Name	% of Immunized Medicaid Recipients
1.	Cummings Nursing Home	98%
2.	Ledgewood Nursing Home	95%
3.	Eastport Nursing Home	95%
4.	Mercy Home-Eagle Lake	94%
	Springbrook Nursing Care Center	94%
6.	Orono Commons	93%
	St. Joseph's Nursing Home	93%
8.	Sanfield Living Center	91%
9.	Sanford Health Care Facility	90%

TOP NURSING FACILITIES WHO IMMUNIZED AGAINST INFLUENZA:

Rank	Facility Name	% of Immunized Medicaid Recipients
1.	Jackman Regional HC	100 %
2.	Harbor Hill	97%
3.	Eastport Memorial	95%
4.	MerePoint Nursing Home	94%
5.	Maine General at Glenridge	95%
6.	High View Manor	92%
7.	Ledgeview Manor	92%
8.	Maine Veterans-So. Paris	92%
9.	Forest Hill Manor	91%
	Katahdin Nursing Home	91%
	Springbrook Nursing Care Center	91%
	Seaside Nursing Home	91%

FACCT SURVEY UPDATE

The Maine Department of Human Services and the Foundation for Accountability (FACCT) have begun a joint project which is designed to pilot a Promoting Healthy Development Survey for Medicaid Recipients.

The Bureau of Medical Services, in conjunction with the Foundation for Accountability has been collecting survey data regarding recipient's interpretations of services provided to children under the age of 4.

At this time the State of Maine has recognized the largest response rate of any of the other 5 states that have implemented this survey. Maine is pleased to announce that 60% of the recipients have responded to the survey.

The Quality Management Staff have entered this data and have begun follow up calls to recipients requesting the non-respondents to complete the survey. In addition the Bureau staff have been able to link these surveys to claims and Bright Future Forms. The Foundation for Accountability has begun analyzing this data and will be submitting reports to the Bureau over the next quarter. Once the Bureau has this data, we will be sharing this information through this newsletter.

Should a provider receive questions from recipients or have questions regarding this survey, Maine Medicaid would like to encourage you or the recipient to call 1-877-289-0383.

SMOKING CESSATION

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use our PCPIP and PrimeCare quarterly reports to physician to provide data on number of smokers being identified, counselled and treated with medications.

There are two groups to focus on in these efforts—pregnant women and the children of smokers.

We need to ensure both 100% prenatal screening for smoking and 100% attempted smoking cessation in pregnant women. Some providers have found it useful to screen and monitor for smoking in pregnant women with urine cotinine levels (Foundation for Blood Research). We support this strategy and will enclose additional material regarding this tool.

We want to eliminate some of the obstacles to treating smokers. One example concerns a pediatrician seeing a child whose parent(s) smokes. We don't want to encourage missed appointments. This is an ideal time for the pediatrician to counsel and treat the parent(s) and be paid for it. The tobacco counselling/management codes will not be subject to authorization by a PrimeCare Provider.

The "Tobacco Cessation Program" codes will be available at some point over the summer (once the money is available in the budget). Our next mailing will provide all the necessary details.

BLOOD LEAD SCREENING RATES

Medicaid Lead Testing rates among FP/GPs and Pediatricians, 10/1/98-9/30/99

Rank	Family Practice	Age One	% with 1+ Test*
1	Merrill R Farand Jr.	12	75.0%
2	D. L. Jeannotte	15	60.0%
3	Christopher T Bartlett	14	57.1%
	Kerry Crowley	14	57.1%
5	Gust S. Stringos	16	50.0%
	D. Axelman	10	50.0%
7	Noah Nesin	19	47.4%
8	Carl Edward Flynn	11	45.5%
9	Laurie C. Ludington	10	40.0%
	J. M. Mendes	10	40.0%
	Michael Lambke	25	40.0%
Rank	Family Practice	Age Two	% with 1+ Test*
1	A. Dorney	11	45.5%
2	D. Axelman	10	40.0%
3	Rosalind R. Waldron	13	30.8%
	Gust S. Stringos	13	30.8%
5	Kamlesh N. Bajpai	11	27.3%
6	Donald G. Brushett	31	25.8%
7	Raymond J. Tardiff	10	20.0%

Rank	Pediatrics	Age One	% with 1+ Test*
1	Maria Cuda	12	100.0%
2	John Miller	10	90.0%
3	Gautam S.S. Popli	25	84.0%
4	Maria S. J. Noval	18	83.3%
5	C. E. Danielson	18	77.8%
6	Ann P. Simmons	29	75.9%
7	William T. Whitney	51	72.5%
8	Lila H. Monahan	52	67.3%
9	Kathleen Hickey	75	66.7%
10	Wenda L. Saunders	35	65.7
Rank	Pediatrics	Age Two	% with 1+ Test*
1	Iris Silverstein	19	63.2%
2	Ann P. Simmons	24	62.5%
3	Gautam S.S. Popli	18	61.1%
4	Michael P. Hoffman	40	60.0%
5	Kathleen Hickey	55	54.5%
6	John Hickey	63	54.0%
7	Lila H. Monahan	39	51.3%
8	Deborah L. Patton	14	42.9%
9	Jeffrey Stone	54	38.9%
10	John F. Milliken Jr.	21	38.1%

In Accordance with Title VI of the Civil Rights Act of 1964 (42 USC § 1981, 2000d et. seq.) Section 504 of the Rehabilitation Act of 1973, as amended (29 USC § 794), the Age of Discrimination Act 1975, as amended (42 USC § 12131 et. seq.), and Title IX of the Education Amendments of 1972, (34 CFR Parts 100, 104, 106 and 110), the Maine Department of Human Services does not discriminate on the basis of sex, race, color, national origin, disability or age in admission or access to or treatment or employment in its programs and activities. Ann Twombly, Civil Rights Compliance Coordinator, has been designated to coordinate our efforts to comply with the US Department of Health and Human Services regulations (45 CFR Parts 80, 84 and 91), the Department of Justice regulations (28 CFR Part 35), and the US Department of Education regulations (34 CFR Part 106), implementing these Federal laws. Inquiries concerning the application of these regulations and our grievance procedures for resolution of complaints alleging discrimination may be referred to Ann Twombly at 221 State Street, Augusta, Maine 04333, Telephone number: (207) 287-3488 (voice) or 800-332-1003 (TDD), or Assistance Secretary of the Office of Civil Rights of the applicable department (e.g. the Dept. of Education), Washington, D.C.